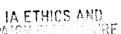
File with:

lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073



## FOR INSTRUCTIONS, SEE BACK OF FORM A ETHICS AND DISCLOSURE SUMMARY PAGE AND THE BD.





COMMITTEE NAME (Must be same as on Statement of	Organization) 2008 MAY 19 PM 3: 00	
Acrican American Leadersh	PAC DISCLOSUR DR-2 DISCLOSUR	·
IMPORTANT: Indicate by # type of committee you are reporting	for: (Pay 07/2007) DEDORT	.E.
(1)Statewide/Legislative/Judge Standing for Retention Candida (4)County Central Committee (5)County Candidate (6)City C	Candidate (7)School Board or Other Political	
Subdivision Candidate (8) County PAC (9) City PAC (10) Sch 11) Local Ballot Issue	nool Board or Other Political Subdivision PAC ( Comm. #	3
CANDIDATE COMMITTEES ONLY:	Logged In S	
Candidate Name	Political Party (if applicable) Scanned	
	Computer	
Office Sought	District (if Senate or House) Audited	
Late reports are subject to possible civil and criminal penalties	s. Pursuant to lowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a	
	(,, , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
V %	Mr. 21.2 7020 18 mm 08	
SIGNATURE OF PERSON FILING REPORT	515-262-7828 18 May 08 TELEPHONE DATE SIGNED	
	TELLI HONE SATE SIGNED	
I AM FILING A	REPORT FOR (1) ELECTION /(2)NON-ELECTION YEAR.	
(réport date)	Indicate by #	
☐CHECK IF AMENDMENT TO REPORT DATED	Local Committees, enter Date of Election	
_		
Check if this is final (termination) report and attach Noti (You must continue to file reports until a DR-3 is	County & Local Committees, enter County is	n
(Tou must continue to the reports until a DK-3 is	Tiled.) which Election is held	
STATEMENT OF CASH ON HA	AND	
<b>CASH ON HAND</b> at the beginning of the reporting period.		
committee. This amount MUST be the same as of the last reporting period or must be zero if this	the cash on hand at the end	
·	is first report filed.) $5/4-23$	
ADD TOTAL MONEY TAKEN IN THIS PERIOD		
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## For Instructions, See Back of Form

## **CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

<b>A</b> (Rev. 07/03)	MONETARY RECEIPTS		
CHECK THIS BOX IF AMENDING FORM			

SCHEDULE

COMMITTEE NAME (Must be same as on Statement of Organization)	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION DISCLOSURE BOARD.

1. THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED	PAC ID NUMBER (if applicable)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP	AMOUNT	√ IF FO
(MM/DD/YR)	AND PAC CHECK		TO CANDIDATE*	RECEIVED	FUND-
	NUMBER		(if applicable)		RAISEF
	ID#	Vicky Long-Hill 637 36+ 5+. Des Moines, IA 50312			II TOOM
04/12/08	CK#	627 30+6 5+.		\$	
417700	CK# 4520	The Moines TA 50317		25.00	
	ID#	003 / 503/2	<del> </del>		<u> </u>
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			SUB-TOTAL	. 2500	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If sumame of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page \_\_\_\_\_ of \_/ (for Schedule A)

TOTAL (if last page of this schedule)